

**HONOLULU ETHICS COMMISSION**

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768

Email: ethics@honolulu.govWebsite: <http://www.honolulu.gov/ethics/>

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HONOLULU
ETHICS COMMISSION
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2019 REGISTRATIONLobbyist Registration
(Type or Print Clearly)**PART I LOBBYIST**

NAME (Last) (First) (Middle)

Ma Sandy

LOBBYIST FIRM/EMPLOYER (if applicable)

TELEPHONE

808 275 6275

MAILING ADDRESS (No. and Street or P.O. Box)

307A Kamehameha Street P.O. Box 2240

FAX

EMAIL sma@commoncause.org

(City) Honolulu

(State)

HI

(Zip Code)

96813 96804

PART II.A ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)

Common Cause

TELEPHONE

202-833-1200

MAILING ADDRESS (No. and Street or P.O. Box)

805 15th Street NW, Suite 800

FAX

EMAIL info@commoncause.org

(City) Washington, DC

(State)

(Zip Code)

20005

ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)

over 1 million

☐ Not Applicable

METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS

National Governing Board

☐ Not Applicable**PART II.B NO LONGER LOBBYING**☐ I am no longer authorized to lobby on behalf of the organization in Part II.A

DATE

PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY☐ Business & Economic Development☐ Community Services☐ Customer Services☐ Culture & Arts☐ Housing☐ Public Works, Infrastructure & Sustainability☐ Parks & Recreation☐ Public Health, Safety & Welfare☐ Tourism☐ Transportation☐ Zoning & Planning☐ Specific Legislation:☐ Additional Sheet(s) Attached

Bill No. _____ (Year) _____

Reso No. _____

Admin. Rule No. _____

Dept. _____

☒ Other (indicate below):

Voting rights, ethics, good governance

PART IV LOBBYIST CERTIFICATION

I hereby certify that the foregoing statements are true and correct.

LOBBYIST SIGNATURE

August 21, 2019

DATE

Subscribed and sworn to before me

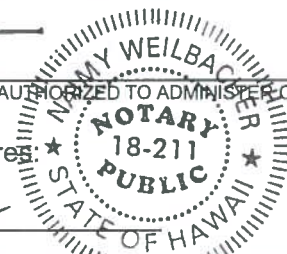
This 21 day of August, 2019.

By:

NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS

My commission expires:

04/22/2022



see Notary Certification on the back

PART V AUTHORIZATION TO LOBBY

NAME

Elizabeth Marchant

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

CHIEF FINANCIAL OFFICER

NAME OF ORGANIZATION (if applicable)

Common Cause

TELEPHONE

202-833-1200

MAILING ADDRESS (No. and Street or P.O. Box)

805 15th Street NW, Suite 800

FAX

EMAIL

info@commoncause.org

(City)

Washington, DC

(State)

(Zip Code)

20005

I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.

(Signature of Authorizing Officer or Person Represented)

June 7, 2019

(Date)



Doc. Date: 8/24/19 # Pages: 2
Notary Name: Naimy Weilbacher McCircuit
Doc. Description: Certification
[Signature] 8/24/19
Notary Signature Date
NOTARY CERTIFICATION

